

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Mississippi Republican Party

ADDRESS (number and street)

P. O. Box 60

Check if different  
than previously  
reported. (ACC)

Jackson

MS

39205

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00084368

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2009

through

10

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Arnie Hederman

Signature of Treasurer

Electronically Filed by Arnie Hederman

Date

11

19

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**

(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
Mississippi Republican Party

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div>Y Y Y Y 2009</div>		46505.59
(b) Cash on Hand at Beginning of Reporting Period .....	50864.88	
(c) Total Receipts (from Line 19) .....	13432.54	499243.53
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	64297.42	545749.12
7. Total Disbursements (from Line 31) .....	33680.18	515131.88
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	30617.24	30617.24
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Mississippi Republican Party

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	6735.00	240253.50
(ii) Unitemized .....	6353.50	167224.44
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	13088.50	407477.94
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	6000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	13088.50	413477.94
12. Transfers From Affiliated/Other Party Committees .....	0.00	65000.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	343.84	763.69
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.20	1.90
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	20000.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	20000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	13432.54	499243.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	13432.54	479243.53

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	3463.82	118756.86	
(ii) Non-Federal Share.....	9764.97	145829.15	
(b) Other Federal Operating Expenditures.....	8311.86	100969.15	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	21540.65	365555.16	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	370.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	370.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	12139.53	149206.72	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	12139.53	149206.72	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	33680.18	515131.88	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23915.21	369302.73	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	13088.50	413477.94
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	370.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	13088.50	413107.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11775.68	219726.01
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	343.84	763.69
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	11431.84	218962.32

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

James Perry

Mailing Address 1218 Rosehill Circle

City

Jackson

State

MS

Zip Code

39202-2123

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Manufacturer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211484

Amount of Each Receipt this Period

20.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

David Burckel

Mailing Address 67 Dover Trace

City

Hattiesburg

State

MS

Zip Code

39401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southern Development Resources

Occupation

CEO of Healthcare

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 0 9

Transaction ID: 91016.C212000

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Hayes Dent

Mailing Address P. O. Box 55949

City

Jackson

State

MS

Zip Code

39296

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MS Development Authority

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211485

Amount of Each Receipt this Period

20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Andrew Martinolich

Mailing Address 599 Suebe Street

City

Bay Saint Louis

State

MS

Zip Code

39520-2426

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211486

Amount of Each Receipt this Period

20.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Raymond Davis

Mailing Address 511 Bay Street

City

Brookhaven

State

MS

Zip Code

39601-4037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211490

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Sally Brown

Mailing Address 3111 W. Lake Drive

City

Meridian

State

MS

Zip Code

39307-4144

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211491

Amount of Each Receipt this Period

25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

70.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A.

Full Name (Last, First, Middle Initial)

William Mounger

Mailing Address 200 E. Capitol Street, #1601

City

Jackson

State

MS

Zip Code

39201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211494

Amount of Each Receipt this Period

50.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Mary Allsup

Mailing Address 21027 Hwy 14

City

Macon

State

MS

Zip Code

39341-9533

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Bookkeeper

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211499

Amount of Each Receipt this Period

15.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Haley Barbour

Mailing Address 648 Dogwood Drive

City

Yazoo City

State

MS

Zip Code

39194

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Of MississippiOccupation  
Governor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211504

Amount of Each Receipt this Period

25.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

90.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A.

Full Name (Last, First, Middle Initial)

Homer Best, Jr.

Mailing Address 2431 Lake Circle

City

Jackson

State

MS

Zip Code

39211-6622

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Oil & Gas

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211513

Amount of Each Receipt this Period

20.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Edwin Brent

Mailing Address PO Box 8

City

Greenville

State

MS

Zip Code

38702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211520

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Cecil Cartwright

Mailing Address P. O. Box 227

City

Yazoo City

State

MS

Zip Code

39194-0227

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211525

Amount of Each Receipt this Period

25.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

70.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Richard Clark, Jr.

Mailing Address #3 Cherokee Circle

City

Hattiesburg

State

MS

Zip Code

39401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211529

Amount of Each Receipt this Period

10.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Thad Cochran

Mailing Address 113 Dirksen Senate Office

City

Washington

State

DC

Zip Code

20510

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United States Senate

Occupation  
U. S. Senator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211532

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Harry Collins

Mailing Address P. O. Box 215

City

Scott

State

MS

Zip Code

38772

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Delta & Pine Land Company

Occupation  
V.P. Operation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211533

Amount of Each Receipt this Period

20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

55.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Karl Cornwell

Mailing Address 4644 East Drive

City

Belden

State

MS

Zip Code

38826-9516

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211535

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Irvin Cronin

Mailing Address 1609 Linda Drive

City

Clinton

State

MS

Zip Code

39056

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211537

Amount of Each Receipt this Period

10.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Dean, Jr.

Mailing Address P. O. Drawer 272

City

Leland

State

MS

Zip Code

38756

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211541

Amount of Each Receipt this Period

10.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A.

Full Name (Last, First, Middle Initial)

Nell Frisbie

Mailing Address P. O. Box 879

City

Kiln

State

MS

Zip Code

39556-0879

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211553

Amount of Each Receipt this Period

15.00

Receipt

B.

Full Name (Last, First, Middle Initial)

John Geary

Mailing Address 116 Green Drive

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morgan Keegan And CoOccupation  
Managing Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211557

Amount of Each Receipt this Period

10.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Frank Genzer

Mailing Address 145 Saint Jude Street

City

Biloxi

State

MS

Zip Code

39530-3602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211558

Amount of Each Receipt this Period

25.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

50.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

W. W. Gresham

Mailing Address P. O. Box 690

City

Indianola

State

MS

Zip Code

38751-0690

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gresham Petro, Co.

Occupation  
Oil Merchant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211566

Amount of Each Receipt this Period

20.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

G. O. Griffith, Jr.

Mailing Address 625 Oakland Terrace

City

Alexandria

State

VA

Zip Code

22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Barbour, Griffith & Rogers

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211568

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jerry Gullledge

Mailing Address 104 Dampeer Street

City

Crystal Springs

State

MS

Zip Code

39059-2561

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211569

Amount of Each Receipt this Period

40.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

85.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Mark Henry

Mailing Address 321 Avalon Way

City

Brandon

State

MS

Zip Code

39047

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Of Mississippi

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211577

Amount of Each Receipt this Period

20.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

William Hill

Mailing Address 2627 Hwy 15 S

City

Woodland

State

MS

Zip Code

39776

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211579

Amount of Each Receipt this Period

20.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Alben Hopkins

Mailing Address 2701 - 24th Avenue

City

Gulfport

State

MS

Zip Code

39501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211584

Amount of Each Receipt this Period

10.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Dewey Lane

Mailing Address P. O. Box 1245

City

Pascagoula

State

MS

Zip Code

39568-1245

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211595

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Jeanne Luckey

Mailing Address 200 Bellevue Circle

City

Mobile

State

AL

Zip Code

36608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211599

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

M. L. McCarty

Mailing Address P. O. Box 1363

City

Columbus

State

MS

Zip Code

39703-1363

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211610

Amount of Each Receipt this Period

25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

H. T. Miller, III

Mailing Address 291 W. Park Avenue

City

Drew

State

MS

Zip Code

38737-3344

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211615

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

James Moreton

Mailing Address P. O. Box 537

City

Brookhaven

State

MS

Zip Code

39601-0537

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211623

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

John Palmer

Mailing Address P. O. Box 3747

City

Jackson

State

MS

Zip Code

39207-3747

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gulf South Capital

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211631

Amount of Each Receipt this Period

10.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

85.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

C. Ray Phillips

Mailing Address 372 Sundial Road

City

Madison

State

MS

Zip Code

39110-8772

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211636

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Rubel Phillips

Mailing Address 258 Braeburn

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211638

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

J. W. Pressler

Mailing Address 807 Hickory Avenue

City

Mc Comb

State

MS

Zip Code

39648-2213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211641

Amount of Each Receipt this Period

30.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

155.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Clarke Reed

Mailing Address 139 Bayou Road

City

Greenville

State

MS

Zip Code

38701-7702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211644

Amount of Each Receipt this Period

15.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Michael Retzer

Mailing Address P. O. Box 4457

City

Greenville

State

MS

Zip Code

38704-4457

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
U. S. Government

Occupation  
Ambassador

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211645

Amount of Each Receipt this Period

10.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

R. S. Runnels

Mailing Address P. O. Box 605

City

Magee

State

MS

Zip Code

39111-0605

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211657

Amount of Each Receipt this Period

25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Lloyd Spivey, Jr.

Mailing Address 357 E. North Street

City

Canton

State

MS

Zip Code

39046-3813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211672

Amount of Each Receipt this Period

15.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Howard Stover

Mailing Address 6 Water Stone Place

City

Jackson

State

MS

Zip Code

39211-5987

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Oil & Gas

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211674

Amount of Each Receipt this Period

10.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Thomas Turner

Mailing Address 1 Cypress Ln

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211683

Amount of Each Receipt this Period

10.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

35.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Wirt Yerger, Jr.

Mailing Address 129 Woodland Circle

City

Jackson

State

MS

Zip Code

39216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211705

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Mark Keenum

Mailing Address 3109 Circle Hill Road

City

Alexandria

State

VA

Zip Code

22305-1607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Miss State

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211711

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Helen Beeman

Mailing Address 115 Pecan Circle

City

Quitman

State

MS

Zip Code

39355-2653

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Quitman Schools

Occupation

Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211716

Amount of Each Receipt this Period

20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

70.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A.

Full Name (Last, First, Middle Initial)

James Herring

Mailing Address 232 E. Semmes Street

City

Canton

State

MS

Zip Code

39046-4530

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Herring Long and CrewsOccupation  
Attorney

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211719

Amount of Each Receipt this Period

10.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Robert T. Hardeman

Mailing Address 903 Robert E. Lee Drive

City

Greenwood

State

MS

Zip Code

38930-2434

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/AOccupation  
Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211728

Amount of Each Receipt this Period

25.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Ellett Lawrence

Mailing Address 400 E. Cleveland Avenue

City

Greenwood

State

MS

Zip Code

38930-3112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lawrence PrintingOccupation  
Owner

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211729

Amount of Each Receipt this Period

15.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

50.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Tom Flinn

Mailing Address P. O. Box 384

City

Hernando

State

MS

Zip Code

38632-0384

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211735

Amount of Each Receipt this Period

35.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Hoopy Stringer, Jr.

Mailing Address 104 Boxwood Cove

City

Brandon

State

MS

Zip Code

39042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SkyTel

Occupation  
Project Supervisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211738

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Frank Cannon

Mailing Address 528 Mockingbird Drive

City

Long Beach

State

MS

Zip Code

39560-3118

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211739

Amount of Each Receipt this Period

50.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

C. T. Carley

Mailing Address 213 Windsor Road

City

Starkville

State

MS

Zip Code

39759-2137

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211743

Amount of Each Receipt this Period

20.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

B. Keith Heard

Mailing Address 1300 Connecticut Avenue, NW, #600

City

Washington

State

DC

Zip Code

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Griffin, Johnson, Dover

Occupation

Public Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1180.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211756

Amount of Each Receipt this Period

20.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

A. C. Tipton, Jr.

Mailing Address 971 Lakeland Drive, Suite 557

City

Jackson

State

MS

Zip Code

39216-4609

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 9

Transaction ID: 91117.C212516

Amount of Each Receipt this Period

100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

140.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

John Perkins

Mailing Address 401 S Jackson Street

City

Brookhaven

State

MS

Zip Code

39601

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	0	9

Transaction ID: 91016.C211764

Amount of Each Receipt this Period

25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Mark McCreery

Mailing Address 253 Ridge Drive

City

Jackson

State

MS

Zip Code

39216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	0	9

Transaction ID: 91016.C211771

Amount of Each Receipt this Period

20.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

W. P. Bridges, Jr.

Mailing Address 1904 Lakeland Drive  
attn: Nancy

City

Jackson

State

MS

Zip Code

39216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bridges Mortgage Co.

Occupation

Mortgage Co. Exec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	0	9

Transaction ID: 91016.C211984

Amount of Each Receipt this Period

1250.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

1295.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

John Taylor

Mailing Address 104 Hidden Heights

City

Ridgeland

State

MS

Zip Code

39157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOAMCA Chemical Products

Occupation

Manufacturer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211792

Amount of Each Receipt this Period

40.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

William Sones

Mailing Address P.O. Box 889

City

Brookhaven

State

MS

Zip Code

39602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Bank & Trust Co.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211794

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Richard McRae

Mailing Address 3021 Greens Crossing Road

City

Jackson

State

MS

Zip Code

39213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mcraes

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 1 / 2 0 0 9

Transaction ID: 91117.C212526

Amount of Each Receipt this Period

240.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

305.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Phil Morris

Mailing Address 600 Pinecrest Cove

City

New Albany

State

MS

Zip Code

38652

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Morris Recycling, Inc.

Occupation

President - Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Transaction ID: 91117.C212015

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Barbara Sanders

Mailing Address 501 Pumping Station Rd.

City

Daleville

State

MS

Zip Code

39326

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kemper County

Occupation

Election Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211806

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ike D. Hopper

Mailing Address 9604 Firetower Rd.

City

Porterville

State

MS

Zip Code

39352

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211808

Amount of Each Receipt this Period

25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Victor P. Smith

Mailing Address P. O. Box 6177

City

Pearl

State

MS

Zip Code

39288-6177

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Oil & Gas

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 0 9

Transaction ID: 91016.C211982

Amount of Each Receipt this Period

10.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Sue Stedman

Mailing Address 101 Gloucester Road

City

Natchez

State

MS

Zip Code

39120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Real Estate Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1120.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211817

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Noel Coward

Mailing Address 10576 Cambrooke Cv

City

Collierville

State

TN

Zip Code

38017-3600

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cellular South

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211818

Amount of Each Receipt this Period

30.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

65.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 78

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Greg Snowden

Mailing Address P. O. Box 3807

City

Meridian

State

MS

Zip Code

39303-3807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	0	9

Transaction ID: 91016.C211819

Amount of Each Receipt this Period

30.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Delbert Hosemann, Jr.

Mailing Address 2219 Heritage Hills Dr.

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Of MississippiOccupation  
Secretary of State

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	7	/	2	0	0	9

Transaction ID: 91016.C211820

Amount of Each Receipt this Period

10.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Joe D. Nosef

Mailing Address 2208 Heritage Hill Drive

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	9

Transaction ID: 91117.C212009

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

540.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

John P. Fullenwider

Mailing Address P. O. Box 2020

City

Oxford

State

MS

Zip Code

38655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JPB Pathology, Inc.

Occupation

Medical Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211823

Amount of Each Receipt this Period

10.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Charlie Williams

Mailing Address P. O. Box 946

City

Senatobia

State

MS

Zip Code

38668

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211830

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Melanie Rhodes

Mailing Address 120 Quail Ridge Drive

City

Madison

State

MS

Zip Code

39110-8239

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Transaction ID: 91117.C212011

Amount of Each Receipt this Period

110.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

220.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Tony Geiger

Mailing Address 1776 Plantation

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FMS Lighting Mgt.

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211836

Amount of Each Receipt this Period

15.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Hubert Ratliff

Mailing Address 1092 Rolling Hills Drive

City

Crystal Springs

State

MS

Zip Code

39059

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211857

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Geraldine Donovan

Mailing Address 202 Weathersby Road

City

Hattiesburg

State

MS

Zip Code

39402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211877

Amount of Each Receipt this Period

30.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

70.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Ashley Skellie

Mailing Address PO Box 38

City

Long Beach

State

MS

Zip Code

39560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211880

Amount of Each Receipt this Period

20.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Carol King

Mailing Address 153 Carol King Road

City

Mendenhall

State

MS

Zip Code

39114-4908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211887

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Donald R. Taylor

Mailing Address 15018 New Zion Road

City

Crystal Springs

State

MS

Zip Code

39059-8838

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1190.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211888

Amount of Each Receipt this Period

20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

65.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Gary Gilmore

Mailing Address 8828 Kipapa Way

City

Diamondhead

State

MS

Zip Code

39525-4205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211889

Amount of Each Receipt this Period

10.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Spence Flatgard

Mailing Address 214 Silas Trace

City

Ridgeland

State

MS

Zip Code

39157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Smith Reeves & Yarborough  
PLLC

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211891

Amount of Each Receipt this Period

20.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Nicholas Thompson

Mailing Address 70 I St. SE Apt 325

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Tarrance Group

Occupation  
Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211894

Amount of Each Receipt this Period

20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

50.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A.

Full Name (Last, First, Middle Initial)

Sharon Pratt

Mailing Address P.O. Box 159

City

Bailey

State

MS

Zip Code

39320

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lauderdale Co. Schools

Occupation

Music Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211896

Amount of Each Receipt this Period

20.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Henry Barbour

Mailing Address 685 Woodland Drive

City

Yazoo City

State

MS

Zip Code

39194

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol Resources, LLC

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211897

Amount of Each Receipt this Period

50.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Nathan Wells

Mailing Address 790 Highpoint Drive

City

Byram

State

MS

Zip Code

39272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Winning Edge, LLC

Occupation

Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211906

Amount of Each Receipt this Period

10.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

80.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Brad White

Mailing Address 1547 Jupiter Rd.

City

Braxton

State

MS

Zip Code

39044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mississippi Republican Pa-  
rty

Occupation  
Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211910

Amount of Each Receipt this Period

50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Mike Maynard

Mailing Address P.O. Box 562

City

Tupelo

State

MS

Zip Code

38802

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weatheralls Inc.

Occupation  
Sales

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211915

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Wayne Weidie

Mailing Address 3908 Cambridge St.

City

Jackson

State

MS

Zip Code

39216

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Adams & Reese, LLP

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211916

Amount of Each Receipt this Period

20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

95.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

James H. Wilson

Mailing Address Wilsons Termite

206 A E. Government St.

City

Brandon

State

MS

Zip Code

39042

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wilsons Termite

Occupation

Pest Control

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211923

Amount of Each Receipt this Period

80.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Hilda Povall

Mailing Address P.O. Box 1199

City

Cleveland

State

MS

Zip Code

38732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1980.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211927

Amount of Each Receipt this Period

50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Jo Anne Goodgame

Mailing Address P.O. Box 132

City

Aberdeen

State

MS

Zip Code

39730

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211933

Amount of Each Receipt this Period

20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 78

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

C.H. Williams

Mailing Address 2238 E. Manor Dr.

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Transaction ID: 91117.C212014

Amount of Each Receipt this Period

250.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Rebecca Currie

Mailing Address 407 Oliver Drive

City

Brookhaven

State

MS

Zip Code

39601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State Of Mississippi

Occupation  
House of Representatives

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211936

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Pete Lowery

Mailing Address P.O. Box 40

City

DLo

State

MS

Zip Code

39062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211940

Amount of Each Receipt this Period

10.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

285.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 78

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Marsha Roberts

Mailing Address 504 CR 676

City

Quitman

State

MS

Zip Code

39355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211944

Amount of Each Receipt this Period

20.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Tony Palazzo

Mailing Address 698 Mallard Cove

City

Tupelo

State

MS

Zip Code

38801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Urology

Occupation

Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211945

Amount of Each Receipt this Period

10.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Joel Bomgar

Mailing Address 5624 Brentwood Dr.

City

Jackson

State

MS

Zip Code

39211

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bomgar Corporation

Occupation

Founder & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211950

Amount of Each Receipt this Period

25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

55.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 38 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Jeff Weill

Mailing Address 1768 Lelia Drive

City

Jackson

State

MS

Zip Code

39216-4819

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of Jackson

Occupation

City Councilman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211952

Amount of Each Receipt this Period

10.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

J.C. Goldman

Mailing Address 728 Forest Park Circle

City

Philadelphia

State

MS

Zip Code

39350

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Suez Environment North America

Occupation

Engineer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 0 9

Transaction ID: 91117.C212527

Amount of Each Receipt this Period

25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Ken McCullough

Mailing Address 431 Cherokee Dr.

City

Oxford

State

MS

Zip Code

38655

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 9

Transaction ID: 91016.C211973

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

285.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 78

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Roger Davis

Mailing Address 800 Woodlands Parkway  
Suite 201

City State Zip Code  
Ridgeland MS 39157

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Businessman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Transaction ID: 91117.C212008

Amount of Each Receipt this Period

1000.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Chad Wages

Mailing Address P.O. Box 2905

City State Zip Code  
Ridgeland MS 39158

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mendrop- Wages

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 3 / 2 0 0 9

Transaction ID: 91016.C211989

Amount of Each Receipt this Period

250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Colin Maloney

Mailing Address P.O. Box 1366

City State Zip Code  
Tupelo MS 38802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Transaction ID: 91117.C212016

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

6735.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 78

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Ricoh Americas Corporation

Mailing Address P.O. Box 105533

City

Atlanta

State

GA

Zip Code

30348-5533

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

343.84

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 0 9

Transaction ID: 91117.C212021

Amount of Each Receipt this Period

343.84

Offsets to Operating Expenditure

**SUBTOTAL** of Receipts This Page (optional) .....

343.84

**TOTAL** This Period (last page this line number only) .....

343.84



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A.

Full Name (Last, First, Middle Initial)

Mississippi State Tax Commission

Mailing Address P. O. Box 960

City  
Jackson

State  
MS

Zip Code  
39205-

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21790

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

261.00

-PAYROLL TAXES

B.

Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address P. O. Box 70503

City  
Charlotte

State  
NC

Zip Code  
28272-0503

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21789

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

1919.01

-PAYROLL TAXES

C.

Full Name (Last, First, Middle Initial)

Internal Revenue Service

Mailing Address P. O. Box 70503

City  
Charlotte

State  
NC

Zip Code  
28272-0503

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91016.E21739

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

1760.07

-PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) .....

3940.08

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Fish & Richardson P.C.	<b>Transaction ID:</b> 91016.E21733 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 3295	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	8		2	0	0	9												
City Boston State MA Zip Code 02241-3295	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement -FEC Compliance Firm Candidate Name	<table border="1"> <tr> <td colspan="10">882.50</td> </tr> </table>	882.50																			
882.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001	-FEC COMPLIANCE FIRM																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fish & Richardson P.C.	<b>Transaction ID:</b> 91117.E21765 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 3295	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	8		2	0	0	9												
City Boston State MA Zip Code 02241-3295	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement -FEC Compliance Firm Candidate Name	<table border="1"> <tr> <td colspan="10">657.50</td> </tr> </table>	657.50																			
657.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type: 001	-FEC COMPLIANCE FIRM																				
<b>C.</b> Full Name (Last, First, Middle Initial) Mamie C. Taylor	<b>Transaction ID:</b> 91117.E21780 <b>Date of Disbursement</b>																				
Mailing Address 408 Timber Ridge Way	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	9												
City Brandon State MS Zip Code 39047-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name	<table border="1"> <tr> <td colspan="10">124.88</td> </tr> </table>	124.88																			
124.88																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Category/Type:	REIMBURSEMENT: SEE BELOW																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1664.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 43 / 78

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)  
Blue Cross Blue Shield of TN

Mailing Address 85 N. Danny Thomas Blvd.

City State Zip Code  
Memphis TN 38103-2398

Purpose of Disbursement  
-Health Insurance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21781

Date of Disbursement

10 / 29 / 2009

Amount of Each Disbursement this Period

124.88

**[MEMO ITEM]**

MEMO: -HEALTH INSURANCE

**B.**

Full Name (Last, First, Middle Initial)  
ADP, Inc.

Mailing Address 5680 New Northside Drive

City State Zip Code  
Atlanta GA 30328-

Purpose of Disbursement  
-Payroll Processing Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21807

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

96.34

-PAYROLL PROCESSING FEES

**C.**

Full Name (Last, First, Middle Initial)  
Mississippi Employment Security Comm.

Mailing Address P O Box 22781

City State Zip Code  
Jackson MS 39225-2781

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21791

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

31.20

-PAYROLL TAXES

**SUBTOTAL** of Disbursements This Page (optional) .....

127.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 78

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Hederman Group	<b>Transaction ID:</b> 91117.E21783 <b>Date of Disbursement</b>																				
Mailing Address P.O. Box 12012	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	9												
City Jackson State MS Zip Code 39236-2012	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement -Political/Financial Consulting Candidate Name	<table border="1"> <tr> <td colspan="10">1300.00</td> </tr> </table>	1300.00																			
1300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	-POLITICAL/FINANCIAL CONSULTING																				
<b>B.</b> Full Name (Last, First, Middle Initial) Bluebonnet Life Insurance Company	<b>Transaction ID:</b> 91016.E21726 <b>Date of Disbursement</b>																				
Mailing Address P. O. Box 22867	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	8		2	0	0	9												
City Jackson State MS Zip Code 39225-2867	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement -Insurance Candidate Name	<table border="1"> <tr> <td colspan="10">110.34</td> </tr> </table>	110.34																			
110.34																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	-INSURANCE																				
<b>C.</b> Full Name (Last, First, Middle Initial) ADP, Inc.	<b>Transaction ID:</b> 91117.E21808 <b>Date of Disbursement</b>																				
Mailing Address 5680 New Northside Drive	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	7		2	0	0	9												
City Atlanta State GA Zip Code 30328-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement -Payroll Processing Fees Candidate Name	<table border="1"> <tr> <td colspan="10">76.88</td> </tr> </table>	76.88																			
76.88																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	-PAYROLL PROCESSING FEES																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1487.22

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 / 78

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

ADP, Inc.

Mailing Address 5680 New Northside Drive

City Atlanta State GA Zip Code 30328-

Purpose of Disbursement  
-Payroll Processing Fees

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21784

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

80.84

-PAYROLL PROCESSING FEES

**B.**

Full Name (Last, First, Middle Initial)

Blue Cross &amp; Blue Shield of MS

Mailing Address P. O. Box 23082

City Jackson State MS Zip Code 39225-3082

Purpose of Disbursement  
-Health Insurance

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21799

Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

346.74

-HEALTH INSURANCE

**C.**

Full Name (Last, First, Middle Initial)

Mississippi State Tax Commission

Mailing Address P. O. Box 960

City Jackson State MS Zip Code 39205-

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91016.E21740

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

235.00

-PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional) ▶

662.58

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.** Full Name (Last, First, Middle Initial)  
Mississippi Employment Security Comm.

Mailing Address P O Box 22781

City Jackson State MS Zip Code 39225-2781

Purpose of Disbursement  
-Payroll Taxes

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91016.E21741

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

24.56

-PAYROLL TAXES

**B.** Full Name (Last, First, Middle Initial)  
Fish & Richardson P.C.

Mailing Address P.O. Box 3295

City Boston State MA Zip Code 02241-3295

Purpose of Disbursement  
-FEC Compliance Firm

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21766

Date of Disbursement

10 / 28 / 2009

Amount of Each Disbursement this Period

405.00

-FEC COMPLIANCE FIRM

**SUBTOTAL** of Disbursements This Page (optional) .....

429.56

**TOTAL** This Period (last page this line number only) .....

8311.86

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 / 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Amanda Wells

Mailing Address 802 Vintage Pointe

City State Zip Code  
Brandon MS 39042-

Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 91117.E21782

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)

Wells Griffith

Mailing Address 1732 Devine St.

City State Zip Code  
Jackson MS 39202-

Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 91016.E21735

Date of Disbursement

/   /

Amount of Each Disbursement this Period

729.04

FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)

Wells Griffith

Mailing Address 1732 Devine St.

City State Zip Code  
Jackson MS 39202-

Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 91117.E21785

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1098.30

FEA SALARY

**SUBTOTAL** of Disbursements This Page (optional) .....

2327.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 / 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Mississippi Republican Party

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Joe Harvey	<b>Transaction ID:</b> 91016.E21736 <b>Date of Disbursement</b>																				
Mailing Address 5 Stanford Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	5		2	0	0	9												
City Jackson State MS Zip Code 39211-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA Salary Candidate Name	<table border="1"> <tr> <td colspan="10">808.90</td> </tr> </table>	808.90																			
808.90																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>FEA SALARY</b>																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Joe Harvey	<b>Transaction ID:</b> 91117.E21786 <b>Date of Disbursement</b>																				
Mailing Address 5 Stanford Court	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		3	0		2	0	0	9												
City Jackson State MS Zip Code 39211-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA Salary Candidate Name	<table border="1"> <tr> <td colspan="10">808.90</td> </tr> </table>	808.90																			
808.90																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>FEA SALARY</b>																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
<b>C.</b> Full Name (Last, First, Middle Initial) Amanda Wells	<b>Transaction ID:</b> 91016.E21721 <b>Date of Disbursement</b>																				
Mailing Address 802 Vintage Pointe	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	2		2	0	0	9												
City Brandon State MS Zip Code 39042-	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement FEA Salary Candidate Name	<table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table>	500.00																			
500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>FEA SALARY</b>																				
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

**SUBTOTAL** of Disbursements This Page (optional) .....

**2117.80**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 / 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Amanda Wells

Mailing Address 802 Vintage Pointe

City State Zip Code  
Brandon MS 39042-

Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 91117.E21756

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)

Brad White

Mailing Address 1547 Jupiter Rd.

City State Zip Code  
Braxton MS 39044-

Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 91016.E21738

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2131.66

FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)

Mamie C. Taylor

Mailing Address 408 Timber Ridge Way

City State Zip Code  
Brandon MS 39047-

Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 91016.E21737

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1273.04

FEA SALARY

**SUBTOTAL** of Disbursements This Page (optional) .....

3904.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 50 / 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A.**

Full Name (Last, First, Middle Initial)

Brad White

Mailing Address 1547 Jupiter Rd.

City Braxton State MS Zip Code 39044-

Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21788

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

2131.66

FEA SALARY

**B.**

Full Name (Last, First, Middle Initial)

Mamie C. Taylor

Mailing Address 408 Timber Ridge Way

City Brandon State MS Zip Code 39047-

Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91117.E21787

Date of Disbursement

10 / 30 / 2009

Amount of Each Disbursement this Period

1273.03

FEA SALARY

**C.**

Full Name (Last, First, Middle Initial)

William Craft

Mailing Address 714 Circle Drive

City Mendenhall State MS Zip Code 39114-

Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 91016.E21718

Date of Disbursement

10 / 01 / 2009

Amount of Each Disbursement this Period

100.00

FEA SALARY

**SUBTOTAL** of Disbursements This Page (optional) .....

3504.69

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 / 78

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

A.

Full Name (Last, First, Middle Initial)

Amanda Wells

Mailing Address 802 Vintage Pointe

City  
BrandonState  
MSZip Code  
39042-Purpose of Disbursement  
FEA Salary

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: 91016.E21722

Date of Disbursement

M M / D D / Y Y Y Y  
1 0 / 0 6 / 2 0 0 9

Amount of Each Disbursement this Period

285.00

FEA SALARY

SUBTOTAL of Disbursements This Page (optional) .....

285.00

TOTAL This Period (last page this line number only) .....

12139.53

**METHOD OF ALLOCATION FOR:**

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

- \_\_\_\_\_ Presidential-Only Election Year (28% Federal)
- \_\_\_\_\_ Presidential and Senate Election Year (36% Federal)
- \_\_\_\_\_ Senate-Only Election Year (21% Federal)
- X   Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal.....  %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

PAGE 53 / 78

NAME OF COMMITTEE (In Full)

**Mississippi Republican Party****RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

## ACTIVITY OR EVENT IDENTIFIER

**2009 SUSTAINING MEMBERSHIP**

ACTIVITY IS:

☒ Fundraising
     
 ☐ Direct Candidate Support

CHECK IF THE RATIO IS:

☐ New
     
 ☐ Revised
     
 ☒ Same as Previously Reported

FEDERAL %

**98.00** %

NONFEDERAL %

**2.00** %Transaction ID:  
H2290128.J31

## ACTIVITY OR EVENT IDENTIFIER

**2009 PHOTO VOTER ID INITIATIVE**

ACTIVITY IS:

☒ Fundraising
     
 ☐ Direct Candidate Support

CHECK IF THE RATIO IS:

☐ New
     
 ☐ Revised
     
 ☒ Same as Previously Reported

FEDERAL %

**91.00** %

NONFEDERAL %

**9.00** %Transaction ID:  
H2391016.J44

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 54 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 FIA Card Services

Mailing Address

P.O. Box 15710

City

State

Zip Code

Wilmington

DE

19886-5710

Purpose of Disbursement:

CREDIT CARD: SEE BELOW

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

145516.29

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491016.E21715

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

74.52

422.27

496.79

**B. Full Name (Last, First, Middle Initial)**  
 McDades

Mailing Address

904A East Fortification

City

State

Zip Code

Jackson

MS

39211-

001

Purpose of Disbursement:

-Meeting Supplies

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

[MEMO ITEM]001-Meeting Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

12.25

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491117.E21829

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.84

10.41

12.25

**C. Full Name (Last, First, Middle Initial)**  
 Texaco, Inc.

Mailing Address

1264 High Street

City

State

Zip Code

Jackson

MS

39202-

002

Purpose of Disbursement:

-Gasoline

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

[MEMO ITEM]002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

46.73

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491117.E21822

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.01

39.72

46.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

74.52

422.27

496.79

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 55 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Texaco, Inc.

Mailing Address

1264 High Street

City	State	Zip Code
Jackson	MS	39202-

002

Purpose of Disbursement:  
 -Gasoline

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]**002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

46.61

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21827

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.99

39.62

46.61

**B. Full Name (Last, First, Middle Initial)**  
 Elite Restaurant

Mailing Address

141 E. Capitol St.

City	State	Zip Code
Jackson	MS	39201-

001

Purpose of Disbursement:  
 -Luncheon

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

11.76

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21833

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.76

10.00

11.76

**C. Full Name (Last, First, Middle Initial)**  
 Elite Restaurant

Mailing Address

141 E. Capitol St.

City	State	Zip Code
Jackson	MS	39201-

001

Purpose of Disbursement:  
 -Luncheon

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

28.23

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21826

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.23

24.00

28.23

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 56 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Chevron

Mailing Address

2351 Passage Road

City	State	Zip Code
Biloxi	MS	39531-

002

Purpose of Disbursement:  
-Gasoline

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM]002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

31.77

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21832

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.77

27.00

31.77

**B. Full Name (Last, First, Middle Initial)**  
Chevron

Mailing Address

2351 Passage Road

City	State	Zip Code
Biloxi	MS	39531-

002

Purpose of Disbursement:  
-Gasoline

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM]002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

48.73

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21825

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7.31

41.42

48.73

**C. Full Name (Last, First, Middle Initial)**  
Exxon

Mailing Address

6154 Old Canton

City	State	Zip Code
Jackson	MS	39211-

002

Purpose of Disbursement:  
-Gasoline

Category/  
Type

Activity or Event Identifier:  
ADMINISTRATION B 41

[MEMO ITEM]002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

42.69

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21823

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.40

36.29

42.69

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 57 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Exxon

Mailing Address

6154 Old Canton

City State Zip Code

Jackson MS 39211-

002

Purpose of Disbursement:  
 -Gasoline

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

[MEMO ITEM]002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

41.50

Date MM / DD / YYYY 10 / 01 / 2009

Transaction ID: H491117.E21820

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.23

35.27

41.50

**B. Full Name (Last, First, Middle Initial)**  
 Exxon

Mailing Address

6154 Old Canton

City State Zip Code

Jackson MS 39211-

002

Purpose of Disbursement:  
 -Gasoline

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

[MEMO ITEM]002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

28.87

Date MM / DD / YYYY 10 / 01 / 2009

Transaction ID: H491117.E21824

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.33

24.54

28.87

**C. Full Name (Last, First, Middle Initial)**  
 Nicks Restaurant

Mailing Address

1501 Lakeland Drive

City State Zip Code

Jackson MS 39216-

001

Purpose of Disbursement:  
 -Luncheon

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

[MEMO ITEM]001-Luncheon

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

36.07

Date MM / DD / YYYY 10 / 01 / 2009

Transaction ID: H491117.E21831

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.41

30.66

36.07

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 58 / 78  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Nicks Restaurant

Mailing Address

1501 Lakeland Drive

City	State	Zip Code
Jackson	MS	39216-

001

Purpose of Disbursement:  
 -Luncheon

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55.24

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21828

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.29

46.95

55.24

**B. Full Name (Last, First, Middle Initial)**  
 Macs Gas 33

Mailing Address

4109 Hwy 49 South

City	State	Zip Code
Florence	MS	39073-

002

Purpose of Disbursement:  
 -Gasoline

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]**002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

46.34

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21830

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.95

39.39

46.34

**C. Full Name (Last, First, Middle Initial)**  
 Yellow Cab Company

Mailing Address

639 13th Street

City	State	Zip Code
San Diego	CA	92101-

002

Purpose of Disbursement:  
 -Taxi Fare

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]**002-Taxi Fare

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20.00

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21821

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.00

17.00

20.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 59 / 78  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 FIA Card Services

Mailing Address

P.O. Box 15710

City

State

Zip Code

Wilmington

DE

19886-5710

Purpose of Disbursement:

CREDIT CARD: SEE BELOW

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

146515.91

Date

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 9

Transaction ID: H491016.E21716

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

149.94

849.68

999.62

**B. Full Name (Last, First, Middle Initial)**  
 Walgreens

Mailing Address

955 North State Street

City

State

Zip Code

Jackson

MS

39201-

001  
Category/  
Type

Purpose of Disbursement:

-Office Supplies

Activity or Event Identifier:

ADMINISTRATION B 41

[MEMO ITEM] 001-Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

45.20

Date

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 9

Transaction ID: H491117.E21851

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

6.78

38.42

45.20

**C. Full Name (Last, First, Middle Initial)**  
 WalMart

Mailing Address

815 South Wheatley

City

State

Zip Code

Ridgeland

MS

39157-

001  
Category/  
Type

Purpose of Disbursement:

-Meeting Supplies

Activity or Event Identifier:

ADMINISTRATION B 41

[MEMO ITEM] 001-Meeting Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

127.33

Date

M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 9

Transaction ID: H491117.E21843

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

19.10

108.23

127.33

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

149.94

849.68

999.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 60 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**

Micro Printing &amp; Blueprint

Mailing Address

167 East Pearl Street

City

State

Zip Code

Jackson

MS

39201-3184

001

Purpose of Disbursement:

-Printing of Office Supplies

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

**[MEMO ITEM]**001-Printing of Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

112.35

Date

M M / D D / Y Y Y Y

1 0 / 0 1 / 2 0 0 9

Transaction ID: H491117.E21846

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

16.85

95.50

112.35

**B. Full Name (Last, First, Middle Initial)**

Micro Printing &amp; Blueprint

Mailing Address

167 East Pearl Street

City

State

Zip Code

Jackson

MS

39201-3184

001

Purpose of Disbursement:

-Printing of Office Supplies

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

**[MEMO ITEM]**001-Printing of Office Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

73.83

Date

M M / D D / Y Y Y Y

1 0 / 0 1 / 2 0 0 9

Transaction ID: H491117.E21847

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

11.07

62.76

73.83

**C. Full Name (Last, First, Middle Initial)**

Kroger

Mailing Address

4910 I-55 North

City

State

Zip Code

Jackson

MS

39206-

001

Purpose of Disbursement:

-Meeting Supplies

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

**[MEMO ITEM]**001-Meeting Supplies

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

124.03

Date

M M / D D / Y Y Y Y

1 0 / 0 1 / 2 0 0 9

Transaction ID: H491117.E21844

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

18.60

105.43

124.03

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 61 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Shell Station

Mailing Address

No. 57525881207 1263 High Street

City State Zip Code

Jackson MS 39211-

002

Purpose of Disbursement:  
 -Gasoline

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]**002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

24.36

Date MM / DD / YYYY 10 / 01 / 2009

Transaction ID: H491117.E21849

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.65

20.71

24.36

**B. Full Name (Last, First, Middle Initial)**  
 Chevron

Mailing Address

2351 Passage Road

City State Zip Code

Biloxi MS 39531-

002

Purpose of Disbursement:  
 -Gasoline

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]**002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43.01

Date MM / DD / YYYY 10 / 01 / 2009

Transaction ID: H491117.E21850

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.45

36.56

43.01

**C. Full Name (Last, First, Middle Initial)**  
 Exxon

Mailing Address

6154 Old Canton

City State Zip Code

Jackson MS 39211-

002

Purpose of Disbursement:  
 -Gasoline

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

**[MEMO ITEM]**002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

36.20

Date MM / DD / YYYY 10 / 01 / 2009

Transaction ID: H491117.E21848

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

5.43

30.77

36.20

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 62 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**

Silver Star

Mailing Address

Hwy 16 W

City	State	Zip Code
Philadelphia	MS	39350-

001

Purpose of Disbursement:  
-LuncheonCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41**[MEMO ITEM]**001-Luncheon

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

17.00

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21841

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.55

14.45

17.00

**B. Full Name (Last, First, Middle Initial)**

Newks

Mailing Address

379 Ridge Way

City	State	Zip Code
Flowood	MS	39232-

001

Purpose of Disbursement:  
-LuncheonCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41**[MEMO ITEM]**001-Luncheon

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

115.13

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21852

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

17.27

97.86

115.13

**C. Full Name (Last, First, Middle Initial)**

Infinity Box Inc.

Mailing Address

16057 Tampla Palms Blvd. West

City	State	Zip Code
Tampa	FL	33647-

001

Purpose of Disbursement:  
-Office SuppliesCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41**[MEMO ITEM]**001-Office Supplies

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

24.95

Date 

M	M
1	0

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21842

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.74

21.21

24.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 63 / 78  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Yellow Cab Company

 Mailing Address  
639 13th Street

 City State Zip Code  
San Diego CA 92101-

002

 Purpose of Disbursement:  
-Taxi Fare
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]002-Taxi Fare

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

43.35

 Date M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 9

Transaction ID: H491117.E21853

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

6.50

36.85

43.35

**B. Full Name (Last, First, Middle Initial)**  
Wine & Spirits in the Quarter

 Mailing Address  
1855 Lakeland Drive # A10

 City State Zip Code  
Jackson MS 39216-

001

 Purpose of Disbursement:  
- Meeting Supplies/Beverages
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41  
[MEMO ITEM]001- Meeting Supplies/Beverages

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

212.88

 Date M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 9

Transaction ID: H491117.E21845

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

31.93

180.95

212.88

**C. Full Name (Last, First, Middle Initial)**  
FIA Card Services

 Mailing Address  
P.O. Box 15710

 City State Zip Code  
Wilmington DE 19886-5710

 Purpose of Disbursement:  
CREDIT CARD: SEE BELOW
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

147262.77

 Date M M / D D / Y Y Y Y  
1 0 / 0 1 / 2 0 0 9

Transaction ID: H491016.E21717

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

112.03

634.83

746.86

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

112.03

634.83

746.86

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 64 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**

Primos Catering

## Mailing Address

2323 Lakeland Drive

City State Zip Code

Jackson MS 39208-

001

## Purpose of Disbursement:

-Luncheon

Category/  
Type

## Activity or Event Identifier:

ADMINISTRATION B 41

**[MEMO ITEM]**001-Luncheon

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25.94

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491117.E21834

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.89

22.05

25.94

**B. Full Name (Last, First, Middle Initial)**

Texaco, Inc.

## Mailing Address

1264 High Street

City State Zip Code

Jackson MS 39202-

002

## Purpose of Disbursement:

-Gasoline

Category/  
Type

## Activity or Event Identifier:

ADMINISTRATION B 41

**[MEMO ITEM]**002-Gasoline

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

13.85

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491117.E21836

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

2.08

11.77

13.85

**C. Full Name (Last, First, Middle Initial)**

American Airlines

## Mailing Address

PO Box 619612 MD 2400

City State Zip Code

Dallas TX 75261-

002

## Purpose of Disbursement:

-Baggage Fees

Category/  
Type

## Activity or Event Identifier:

ADMINISTRATION B 41

**[MEMO ITEM]**002-Baggage Fees

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

30.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491117.E21840

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.50

25.50

30.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 65 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Shell Oil

Mailing Address

Store # 57528819600

City State Zip Code

Clarksdale MS 38614-

002

Purpose of Disbursement:  
-GasolineCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41**[MEMO ITEM]**002-Gasoline

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

45.02

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491117.E21835

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

6.75

38.27

45.02

**B. Full Name (Last, First, Middle Initial)**  
 Hudson News Stand

Mailing Address

1000 International Drive

City State Zip Code

Jackson MS 39208-

001

Purpose of Disbursement:  
-RefreshmentsCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41**[MEMO ITEM]**001-Refreshments

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

20.90

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491117.E21839

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3.14

17.76

20.90

**C. Full Name (Last, First, Middle Initial)**  
 Honey Baked Ham Store

Mailing Address

County Line Rd.

City State Zip Code

Jackson MS 39211-

001

Purpose of Disbursement:  
-LuncheonCategory/  
TypeActivity or Event Identifier:  
ADMINISTRATION B 41**[MEMO ITEM]**001-Luncheon

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

336.16

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491117.E21837

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

50.42

285.74

336.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 66 / 78  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Flowers by Connie

Mailing Address

4974 Raymond Ave.

City	State	Zip Code
Tupelo	MS	38801-

001

Purpose of Disbursement:  
 -Flowers

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41  
**[MEMO ITEM]** 001-Flowers

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

274.99

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491117.E21838

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

41.25

233.74

274.99

**B. Full Name (Last, First, Middle Initial)**  
 Wilbur Stuckey

Mailing Address

6628 Lake Glen Dr.

City	State	Zip Code
Jackson	MS	39213-

001

Purpose of Disbursement:  
 -Building Cleaning & Maintenance

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

147512.77

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	1	/	2	0	0	9

Transaction ID: H491016.E21719

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

37.50

212.50

250.00

**C. Full Name (Last, First, Middle Initial)**  
 Entergy

Mailing Address

P. O. Box 8105

City	State	Zip Code
Baton Rouge	LA	70891-8105

001

Purpose of Disbursement:  
 -Electricity

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

148222.48

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	9

Transaction ID: H491016.E21725

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

90.77

514.39

605.16

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

128.27

726.89

855.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 67 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**

Pennington &amp; Trim Alarm

Mailing Address

4374 Mangum Drive Suite C

City

State

Zip Code

Jackson

MS

39232-2111

001

Purpose of Disbursement:

-Building Security System

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

148606.95

Date

M M

/

D D

/

Y Y

/

Y Y

1 0

0 8

2 0

0 9

Transaction ID: H491016.E21727

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7.38

41.84

49.22

**B. Full Name (Last, First, Middle Initial)**

FP Mailing Solutions

Mailing Address

Dept. 4272

City

State

Zip Code

Elgin

IL

60122-4272

001

Purpose of Disbursement:

-Postage Meter Scale

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149108.03

Date

M M

/

D D

/

Y Y

/

Y Y

1 0

0 8

2 0

0 9

Transaction ID: H491016.E21728

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

26.46

149.93

176.39

**C. Full Name (Last, First, Middle Initial)**

Allied Waste Service

Mailing Address

Jackson

1035 Old Brandon Road

City

State

Zip Code

Flowood

MS

39232-

001

Purpose of Disbursement:

-Garbage Pickup

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

148931.64

Date

M M

/

D D

/

Y Y

/

Y Y

1 0

0 8

2 0

0 9

Transaction ID: H491016.E21729

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

17.10

96.89

113.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

50.94

288.66

339.60

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 68 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**

Exell Companies

Mailing Address

P.O. Box 5393

City State Zip Code

Jackson MS 39296-

001

Purpose of Disbursement:

-Water/Sewer

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

148617.65

Date 

M	M
1	0

 / 

D	D
0	8

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491016.E21730

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.61

9.09

10.70

**B. Full Name (Last, First, Middle Initial)**

Beasley Lawn

Mailing Address

P.O. Box 1775

City State Zip Code

Brandon MS 39043-

001

Purpose of Disbursement:

-Lawn Care

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

148817.65

Date 

M	M
1	0

 / 

D	D
0	8

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491016.E21731

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

30.00

170.00

200.00

**C. Full Name (Last, First, Middle Initial)**

Office Products Plus, Inc.

Mailing Address

P. O. Box 13827

City State Zip Code

Jackson MS 39236-

001

Purpose of Disbursement:

-Office Supplies

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

148557.73

Date 

M	M
1	0

 / 

D	D
0	8

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491016.E21732

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

50.29

284.96

335.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

81.90

464.05

545.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 69 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Office Products Plus, Inc.

Mailing Address

P. O. Box 13827

City	State	Zip Code
Jackson	MS	39236-

001

Purpose of Disbursement:  
 -Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149981.62

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491019.E21747

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

21.41

121.30

142.71

**B. Full Name (Last, First, Middle Initial)**  
 City Services Center

Mailing Address

Payment Processing Center P.O. Box 1595

City	State	Zip Code
Jackson	MS	39215-1595

001

Purpose of Disbursement:  
 -Water/Sewer

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149838.91

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491019.E21748

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10.22

57.91

68.13

**C. Full Name (Last, First, Middle Initial)**  
 Atmos Energy

Mailing Address

PO Box 9001949

City	State	Zip Code
Louisville	KY	40290-1949

001

Purpose of Disbursement:  
 -Utilities

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150126.68

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491019.E21749

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

9.11

51.62

60.73

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

40.74

230.83

271.57

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 70 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 All Metro Pest Services

Mailing Address

108 Office Park Dr., Ste. A

City State Zip Code

Brandon MS 39042-

001

Purpose of Disbursement:  
 -Pest Control

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150035.12

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: H491019.E21750

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

8.03

45.47

53.50

**B. Full Name (Last, First, Middle Initial)**  
 Exell Companies

Mailing Address

P.O. Box 5393

City State Zip Code

Jackson MS 39296-

001

Purpose of Disbursement:  
 -Water/Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150065.95

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: H491019.E21751

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

4.62

26.21

30.83

**C. Full Name (Last, First, Middle Initial)**  
 Federal Express

Mailing Address

P. O. Box 660481

City State Zip Code

Dallas TX 75266-0481

001

Purpose of Disbursement:  
 -Postage/Shipping

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149770.78

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	9

Transaction ID: H491019.E21752

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

23.29

131.96

155.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

35.94

203.64

239.58

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 71 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 AT&T

Mailing Address

P.O. Box 105262

City	State	Zip Code
Atlanta	GA	30348-5262

001

Purpose of Disbursement:  
 -Telephone

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150687.83

Date 

M	M
1	0

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491019.E21753

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

84.17

476.98

561.15

**B. Full Name (Last, First, Middle Initial)**  
 Thomas Joe Harvey

Mailing Address

5 Stanford Court

City	State	Zip Code
Jackson	MS	39211-

Category/  
Type

Purpose of Disbursement:  
 REIMBURSEMENT: SEE BELOW

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150803.83

Date 

M	M
1	0

 / 

D	D
2	3

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21761

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.50

76.50

90.00

**C. Full Name (Last, First, Middle Initial)**  
 Cellular South

Mailing Address

P. O. Box 519

City	State	Zip Code
Meadville	MS	39653-0519

Category/  
Type

Purpose of Disbursement:  
 -Cell Phone

Activity or Event Identifier:  
 ADMINISTRATION B 41

[MEMO ITEM] 001-Cell Phone

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

90.00

Date 

M	M
1	0

 / 

D	D
2	3

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21760

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

13.50

76.50

90.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

97.67

553.48

651.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 72 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**

Cellular South

Mailing Address

P. O. Box 519

City

State

Zip Code

Meadville

MS

39653-0519

001

Purpose of Disbursement:

-Cell Phone

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151468.59

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	9

Transaction ID: H491117.E21768

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

87.48

495.75

583.23

**B. Full Name (Last, First, Middle Initial)**

FP Mailing Solutions

Mailing Address

Dept. 4272

City

State

Zip Code

Elgin

IL

60122-4272

001

Purpose of Disbursement:

-Postage Reset Fee

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152195.51

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	9

Transaction ID: H491117.E21769

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.24

7.05

8.29

**C. Full Name (Last, First, Middle Initial)**

Ricoh Americas Corporation

Mailing Address

P.O. Box 105533

City

State

Zip Code

Atlanta

GA

30348-5533

001

Purpose of Disbursement:

-Copier Lease

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152901.43

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	9

Transaction ID: H491117.E21770

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

53.19

301.43

354.62

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

141.91

804.23

946.14

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 73 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 StorageMax Downtown

Mailing Address

304 South State Street

City	State	Zip Code
Jackson	MS	39201-

001

Purpose of Disbursement:  
 -Storage

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151765.52

Date 

M	M
1	0

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21771

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

33.00

187.00

220.00

**B. Full Name (Last, First, Middle Initial)**  
 ITC Deltacom

Mailing Address

P. O. Box 740597

City	State	Zip Code
Atlanta	GA	30374-0597

001

Purpose of Disbursement:  
 -Long Distance

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151987.22

Date 

M	M
1	0

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21772

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

25.87

146.61

172.48

**C. Full Name (Last, First, Middle Initial)**  
 Office Products Plus, Inc.

Mailing Address

P. O. Box 13827

City	State	Zip Code
Jackson	MS	39236-

001

Purpose of Disbursement:  
 -Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151545.52

Date 

M	M
1	0

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	9

Transaction ID: H491117.E21773

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.54

65.39

76.93

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

70.41

399.00

469.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 74 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Wells Griffith

Mailing Address

1732 Devine St.

City State Zip Code

Jackson

MS

39202-

002

Purpose of Disbursement:  
 -Mileage to Hattiesburg

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

153075.36

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	9

Transaction ID: H491117.E21774

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12.45

70.55

83.00

**B. Full Name (Last, First, Middle Initial)**  
 Office Depot

Mailing Address

Dept. 56-4600055510 P.O. Box 689020

City State Zip Code

Des Moines

IA

50368-9020

001

Purpose of Disbursement:  
 -Office Supplies

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150885.36

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	9

Transaction ID: H491117.E21775

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12.23

69.30

81.53

**C. Full Name (Last, First, Middle Initial)**  
 Beasley Lawn

Mailing Address

P.O. Box 1775

City State Zip Code

Brandon

MS

39043-

001

Purpose of Disbursement:  
 -Lawn Care

Category/  
Type

Activity or Event Identifier:  
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152187.22

Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	8	/	2	0	0	9

Transaction ID: H491117.E21776

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

30.00

170.00

200.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

54.68

309.85

364.53

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 75 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**

Ricoh Americas Corporation

Mailing Address

P.O. Box 105533

City

Atlanta

State

GA

Zip Code

30348-5533

001

Purpose of Disbursement:

-Copier Lease

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152546.81

Date

M M

1 0

D D

2 8

Y Y Y Y

2 0 0 9

Transaction ID: H491117.E21777

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

52.70

298.60

351.30

**B. Full Name (Last, First, Middle Initial)**

Pennington &amp; Trim Alarm

Mailing Address

4374 Mangum Drive Suite C

City

Jackson

State

MS

Zip Code

39232-2111

001

Purpose of Disbursement:

-Building Security System

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

151814.74

Date

M M

1 0

D D

2 8

Y Y Y Y

2 0 0 9

Transaction ID: H491117.E21778

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

7.38

41.84

49.22

**C. Full Name (Last, First, Middle Initial)**

Comcast

Mailing Address

P.O. Box 105184

City

Atlanta

State

GA

Zip Code

30348-5184

001

Purpose of Disbursement:

-Cable

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

152992.36

Date

M M

1 0

D D

2 8

Y Y Y Y

2 0 0 9

Transaction ID: H491117.E21779

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

13.64

77.29

90.93

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

73.72

417.73

491.45

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 76 / 78  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
Wilbur Stuckey

Mailing Address

6628 Lake Glen Dr.

City	State	Zip Code
Jackson	MS	39213-

001

 Purpose of Disbursement:  
-Building Cleaning & Maintenance
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

153325.36

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: H491117.E21793

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		212.50		250.00

**B. Full Name (Last, First, Middle Initial)**  
Print, Parcel and Post, LLC

Mailing Address

80 Spring Branch Rd. Ste. A

City	State	Zip Code
Alexandria	AL	36250-

001

 Purpose of Disbursement:  
-Office Supplies/Letterhead
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

155909.61

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	0	/	2	0	0	9

Transaction ID: H491117.E21795

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
387.64		2196.61		2584.25

**C. Full Name (Last, First, Middle Initial)**  
Key Merchant Services LLC

Mailing Address

7207 Chapman Highway

City	State	Zip Code
Knoxville	TN	37920-6609

001

 Purpose of Disbursement:  
-Merchant Fees
Category/  
Type
 Activity or Event Identifier:  
ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

147617.32

 Date 

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	2	/	2	0	0	9

Transaction ID: H491117.E21800

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.68		88.87		104.55

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
440.82		2497.98		2938.80

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 77 / 78

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**

FP Mailing Solutions

Mailing Address

Dept. 4272

City

State

Zip Code

Elgin

IL

60122-4272

001

Purpose of Disbursement:

-Postage

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149615.53

Date

M M

/

D D

/

Y Y

/

Y Y

Y Y

1 0

1 4

2 0

0 9

Transaction ID: H491117.E21801

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

75.00

425.00

500.00

**B. Full Name (Last, First, Middle Initial)**

Aristotle Publishing, Inc.

Mailing Address

205 Pennsylvania Avenue, SE

City

State

Zip Code

Washington

DC

20003-1164

001

Purpose of Disbursement:

-Merchant Fee

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

150713.83

Date

M M

/

D D

/

Y Y

/

Y Y

Y Y

1 0

2 1

2 0

0 9

Transaction ID: H491117.E21805

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

3.90

22.10

26.00

**C. Full Name (Last, First, Middle Initial)**

Aristotle Publishing, Inc.

Mailing Address

205 Pennsylvania Avenue, SE

City

State

Zip Code

Washington

DC

20003-1164

001

Purpose of Disbursement:

-Merchant Fee

Category/  
Type

Activity or Event Identifier:

ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

149115.53

Date

M M

/

D D

/

Y Y

/

Y Y

Y Y

1 0

1 3

2 0

0 9

Transaction ID: H491117.E21806

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

1.13

6.37

7.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

=

TOTAL AMOUNT

80.03

453.47

533.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 78 / 78  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Mississippi Republican Party

**A. Full Name (Last, First, Middle Initial)**  
 Winning Edge Communications, LLC

Mailing Address

80 Spring Branch Rd. Ste. A

City State Zip Code

Alexandria AL 36250-

004

Purpose of Disbursement:  
 -Postcard Mailer

Category/  
Type

Activity or Event Identifier:  
 VOTER DRIVE

Type of Allocated Activity:

☐ Administrative ☐ Fundraising ☐ Exempt

☒ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

737.87

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 3 0 / 2 0 0 9

Transaction ID: H491117.E21794

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

265.63

472.24

737.87

**B. Full Name (Last, First, Middle Initial)**  
 Southwest Publishing

Mailing Address

2600 NW Topeka Blvd.

City State Zip Code

Topeka KS 66617-

003

Purpose of Disbursement:  
 -Postage

Category/  
Type

Activity or Event Identifier:  
 2009 SUSTAINING MEMBERSHIP

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

55641.53

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 2 1 / 2 0 0 9

Transaction ID: H491117.E21757

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1511.12

30.84

1541.96

**C. Full Name (Last, First, Middle Initial)**  
 Top It Off

Mailing Address

LeFleurs Gallery 4800 I-55 North Suite 16

City State Zip Code

Jackson MS 39211-

003

Purpose of Disbursement:  
 -Event Supplies

Category/  
Type

Activity or Event Identifier:  
 2009 PHOTO VOTER ID INITIATIVE

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt

☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

5534.40

Date  M  M /  D  D /  Y  Y  Y  Y  
 1 0 / 2 8 / 2 0 0 9

Transaction ID: H491117.E21767

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

53.55

5.30

58.85

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1830.30

508.38

2338.68

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

3463.82

9764.97

13228.79